



APPLICATION
BOARD, COMMISSIONS AND COMMITTEE
CITY OF SANTA CLARA

Submit to: City Clerk's Office
1500 Warburton Avenue, Santa Clara, California 95050
Telephone: 615-2220

Board/Commission/Committee Applying For: _____

Name: _____

Address: _____ City: _____ Zip: _____

Telephone: Work: _____ Home: * _____

Email: _____ Fax: _____

Are you a registered voter of Santa Clara? _____ How long? _____

Have you attended a meeting of this Board/Commission/Committee? _____

Present Employer: _____

Job Title: _____

Previous Governmental Bodies/Elective Offices Applicant has served	Position/Office Held	Dates
Civic or Charitable Organizations To which Applicant has belonged	Position Held	Dates

Special Interests/Hobbies/Talents: _____

College, Professional, Vocational, Schools attended	Major Subject	Dates	Degree/Date

***NOTE: DO NOT GIVE HOME TELEPHONE NUMBER UNLESS YOU WANT THAT NUMBER TO
BE PUBLIC INFORMATION.**

Special awards or recognition received: _____

Please state reasons why you want to become a member of this Board/Commission/Committee, including what specific objectives you would be working toward as a member of this advisory board: (Attach second page if necessary)

Any other information which you feel would be useful to the City Council in reviewing your application:
(Attach second page if necessary)

Are you associated with any Organization/Employment that might be deemed a conflict of interest in performing your duties if appointed to this position?

If yes, please state name of Organization/Employment:

City policy directs all advisory body members not to vote on matters where there exists a potential conflict of interest. Would you be willing to abstain from voting if such a conflict arises:

Have you ever been convicted of a felony or a misdemeanor? Do not list any misdemeanor settled in juvenile court. (If yes, explain convictions):

How did you hear about the opening on this Board/Commission/Committee? _____

Signature of Applicant: _____

Date signed: _____